

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	J.K.		4/1/00
O.I.P.E. CLASSIFIER			7-28-00
FORMALITY REVIEW		64477	4-14-00
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
= ..... Allowed      I ..... Interference  
(Through numeral) ..... Canceled      A ..... Appeal  
+ ..... Restricted      O ..... Objected

BEST AVAILABLE COPY

Claim	Final	Original	Date
1	✓	✓	4/1/00
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8	✓	✓	4/1/00
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19	N		
20	✓	✓	
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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